Governor's Health Reform Commission

Presentation to Joint Commission on Health Care *October 26, 2007*

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Agenda

- Recap of Health Reform Commission
- Review of Public Comment
- Report Overview
- Priority Recommendations

Health Reform Commission Recap

- Convened in October 2006
 - O Five full Commission meetings
 - O Six public hearings
 - O More than 20 workgroup meetings
- Workgroups provided 70+ recommendations for the Commission's review
- Based on Commission discussions, HRC staff has identified 40 priority recommendations in the final report
- Final Report has been posted online and given to the Governor
 - O www.hhr.virginia.gov

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Public Comment

Area	# of Comments	Percent of Total Comments
Access to Healthcare	55	7.44%
Expansion of Medicaid/FAMIS	nnsion of Medicaid/FAMIS 125 16.9	
Dental Coverage	111	15.02%
Mental Health Accessibility	16	2.17%
LTC— Community Integration and HCBS	126	17.05%
LTC—Direct Support Professionals	105	14.21%
Nursing Workforce	22	2.98%
Tobacco Use	5	0.07%
School Breakfast and Lunch Program	137	18.54%
Infant Mortality	15	2.03%
Miscellaneous	22	2.98%
Total Submissions	739	100.00%

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Report Overview

- "Roadmap for Virginia's Health"
- Establishes 1st, 2nd, and 3rd tier priorities for the Governor
- Sections:
 - O Executive Summary & Introduction
 - O Workforce
 - O Access to Care
 - O Quality, Transparency, & Prevention
 - OLong-Term Care
 - O Public Comment
 - **O** Appendices

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Proposed 1st Tier Priorities

Workforce		
Healthcare Workforce Data Center	\$	600,000
Physician Retention – Increased staff support for federal designations	\$	176,623
Direct Support Professional Loan Repayment Program	\$	50,000
Replicate DMAS PCA Grant in 6 sites	\$	1,036,800
Access to Care		
Working Uninsured Option	\$	20,000,000
Increase Safety Net Funding	\$	10,000,000
Prevention		
Prevention Collaborative	\$	8,000,000
Quality		
Medicaid Pay for Performance Program for Nursing Homes	\$	8,000,000
Long-Term Care		
Obtain Funding to Implement Money Follows the Person Demonstration	(\$	975,000)
Continue support of Acute and Long-Term Care Integration	\$	0
Increase Medicaid Personal Attendant Services Reimbursement Rate 10% for Consumer-Directed Waiver Program	\$	2,600,000
Subtotal First Tier Priorities	\$	49,488,423

Proposed 2nd Tier Priorities

Workforce		
Physician Retention – Loan Repayment (50 additional awards)	\$	2,500,000
Nurse Retention – Masters/PhD Loan Assistance/Scholarship (30 additional awards)	\$	600,000
Access to Care	•	
Medicaid Expansion to 65% FPL (with routine dental services)	\$	39,700,000
FAMIS Expansion from 200% to 300% FPL	\$	2,000,000
Infant Mortality		
Designate Perinatal Underserved Areas	\$	66,000
Home Visiting Programs	\$	6,800,000
Universal Risk Screen	\$	33,000
Obesity		
School Breakfast / Lunch	\$	8,050,000
PE Benchmarks (software cost)	\$	50,000
Healthy Food Bulk Purchasing - Schools	\$	-
Tobacco Use		
Increase State Employee Smoking Cessation Attempts	\$	30,000
Healthy Lifestyle Insurance Discount	\$	-
Increase Medicaid Personal Care Reimbursement Rate 10% for Non-Consumer-Directed Waiver Services	\$	10,800,000
Subtotal Second Tier Priorities	\$	70,629,000

Proposed 3rd Tier Priorities

Access to Care		
Medicaid Dental Coverage for Currently Enrolled Caretaker Adults	\$	3,200,000
• FAMIS MOMS Expansion (200% FPL)	\$	1,600,000
Transparency		
· One nortal providing transparent information on healthcare costs and	φ	200 000

One portal providing transparent information on healthcare costs and \$200,000 quality to consumers

Prevention	
• SIDS Campaign	\$ 156,000

Long-Term Care

• Continue No Wrong Door Implementation \$ 2,000,000 Subtotal Third Tier Priorities \$ 7,156,000

Proposed Non-Budgetary Priority Items

	Expand scope of practice for physician extenders
Workforce	Remove barriers for State Employees to reenter nurse workforce
	Enable WIBs to have sector strategy, specifically nursing and direct support professionals
Access	Evaluate Medicaid provider access biennially
Access	Annually or biennially study Virginia's uninsured population
Prevention	CDC School Health Program
Prevention	Amend Clean Indoor Air Act
	Establish a LTC Coordination Council
Long-Term	Establish a LTC Advisory Council
Care	• Require local LTC councils to include housing and transportation agencies
	• Study the current network of community-based caregiver support organizations
Area	Other
Prevention	Through EO, require all state agencies and institutions to have x% of healthy food options by 2009
	Develop additional incentives and support mechanisms to increase school participation in the Governor's Nutrition and Physical Activity Scorecard program